POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		2-8-00
O.I.P.E. CLASSIFIER		59	25400
FORMALITY REVIEW	CM	71632	3/29/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected	
= .... Allowed	I .... Interference	
– (Through numeral)... Canceled	A .... Appeal	
÷ .... Restricted	O .... Objected	

BEST AVAILABLE COPY

Claim Final	Original	Date 2/4/03	8/6/03	12/9/4								
	1	✔		✔								
	2	✔	✔	✔								
	3	✔	✔	✔								
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If more than 150 claims or 10 actions
staple additional sheet here

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